

N. B.—In case of more than one child at a birth, a SEPARATE RETURN must be made for each, and the number of each in family with UNBORNING INVA.—THIS IS A PERMANENT RECORD

ARIZONA STATE BOARD OF HEALTH BUREAU OF VITAL STATISTICS STANDARD CERTIFICATE OF BIRTH

State File No. 115
Registered No. 137

1. PLACE OF BIRTH

County Gila State Arizona
District or Township _____ or Village _____
City Miami No. 3230 Turkey Shoot Canon Ward _____
(If birth occurred in a hospital or institution, give its NAME instead of street and number)

2. Full name of child Rosendo Sines (If child is not yet named, make supplemental report, as directed.)

3. Sex of Child male To be answered ONLY in event of plural births. 4. Twin, triplet or other _____ 5. No., in order of birth _____ 6. Legitimate? yes 7. Date of birth Mch. 1, 1926
Month Day Year

8. FATHER
Full name Adelido Sines

9. Residence (Usual place of abode) Miami
If non-resident, give place and state. Arizona

10. Color or race Mex. 11. Age at last birthday 25 (Years)

12. Birthplace (city or place) Jalisco
(State or country) Mex.

13. Occupation
Nature of industry Laborer

20. Number of children of this mother. (Taken as of time of birth of child herein certified and including this child.)

(a) Born alive and now living 3
(b) Born alive but now dead _____
(c) Stillborn _____

21. Were precautions taken against ophthalmia neonatorum? yes

14. MOTHER
Full maiden name Salomen Malacio

15. Residence (Usual place of abode) Miami
If non-resident, give place and state. Arizona

16. Color or race Mex. 17. Age at last birthday 21 (Years)

18. Birthplace (city or place) Aguas Caliente
(State or country) Mex.

19. Occupation
Nature of industry Housewife

CERTIFICATE OF ATTENDING PHYSICIAN OR MIDWIFE

I hereby certify that I attended the birth of this child, who was born at 7 P. m. on the date above stated
(Born alive or stillborn)

Signature Eyril M. Brown M.D.
Physician (Physician or midwife)

Address Miami, Arizona

Filed Mch 11, 1926 E. E. Brown
Registrar

*When there was no attending physician or midwife, then the father, householder, etc., should make this return. A stillborn child is one that neither breathes nor shows other evidence of life after birth.

Given name added from a supplemental report.

Month, day, year

Registrar

Registrar

922-301-246